

**STATE OF SOUTH CAROLINA
DEPARTMENT OF INSURANCE**

Capitol Center, 1201 Main St., Suite 1000 PO Box 100105
Columbia, SC 29201 Columbia, SC 29202-3105

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2006 FEE AND TAX RETURN FOR LIFE, ACCIDENT AND HEALTH INSURER

COMPANY CODE:

COMPANY:

NAIC CODE:

Schedule 01 - South Carolina Taxes and Obligations (All Insurers)		
LINE NO	DESCRIPTION OF TAXES AND OBLIGATIONS	TAXES AND FEES DUE IN SOUTH CAROLINA
0101	Biennial License Fee	0.00
0102	Biennial Fixed License Fee (Schedule 03)	0.00
0103	Insurance Premium Tax - Life (Schedule 05, Ln 0501)	.00
0105	Insurance Premium Tax - A & H (Schedule 05, Ln 0503)	.00
0108	Retaliatory Tax (Foreign Insurers only) (Schedule 02, Ln 0299)	.00
0150	Enter Total allowable Tax Credits (Schedule 06, Ln 0699)	(.00)
0160	Less Amount of Taxes Paid Quarterly	(.00)
0199	TOTAL AMOUNT OF TAXES DUE WITH THIS RETURN	.00

Schedule 02 - Computation of Retaliatory Taxes (Foreign Insurers Only)				
Enter SC Taxes & Obligations in Col. A. Enter Taxes & Obligations which State of Domicile requires of SC Insurer in Col. B				
Attach Computations				
LINE NO	DESCRIPTION OF TAXES AND OBLIGATIONS	TAXES DUE IN SOUTH CAROLINA (A)	TAXES DUE IN STATE OF DOMICILE (B)	RETALIATORY TAXES DUE (C)
0201	Biennial License Fee	0.00	.00	
0202	Biennial Fixed License Fee	0.00	.00	
0203	Insurance Premium Tax - Life	.00	.00	
0205	Insurance Premium Tax - A & H	.00	.00	
0209	Municipal Taxes	.00	.00	
0211		.00	.00	
0212		.00	.00	
0213		.00	.00	
0214		.00	.00	
0215		.00	.00	
0298	Total Fees/Taxes/Obligations	.00	.00	
	Enter Total Fees/Taxes/Obligations for State of Domicile (Schedule 02, Ln 0298, Col. B)			.00
	Less Total Fees/Taxes/Obligations Due South Carolina (Schedule 02, Ln 0298, Col. A)			(.00)
0299	Total Retaliatory Taxes Due South Carolina (if remainder is positive enter on Schedule 01, Ln 0108; otherwise enter \$0.00)			.00

State of _____ County of _____

We, the undersigned officer of the insurer and person preparing this form for the above named company, being severally sworn each for himself deposes and says that this return, including any accompanying schedules and statements has been examined by him, and is to the best of his knowledge, information and belief, a true and correct return, made in good faith and complete in all applicable parts, for the taxable year stated, pursuant to the laws of the state of South Carolina.

Sworn and subscribed before me this _____ day of _____ 20__

Notary Public: Affix Seal

Officer of the Insurer

Person Preparing Fee & Tax Return

Email Address

Email Address

Date Commission Expires

Title

(Area Code) Telephone Number and Extension

COMPANY CODE:

COMPANY:

NAIC CODE:

Schedule 03 - Biennial Fixed License Fee	
The Biennial Fixed License Fee for your Company is	0.00
Enter Biennial Fixed License Fee on Schedule 01, Line 0102.	
The above named insurer is authorized for the following Lines of Authority:	

Schedule 04 - Exhibit of Premiums and Dividends (To Nearest Dollar)				
Attach Copy of SC Business Page and Schedule T				
LINE NO	LINES OF BUSINESS	DIRECT PREMIUMS WRITTEN (A)	DIVIDENDS PAID (B)	NET PREMIUMS Col A - B = C (C)
01.01	Life	.00	.00	.00
02.00	Annuities	.00	.00	.00
13.00	Accident & Health - (Except Ln 15.70)	.00	.00	.00
15.70	Federal Employees Health Benefits Program	.00	.00	.00
99.99	TOTAL SOUTH CAROLINA BUSINESS	.00	.00	.00

Schedule 05 - Insurance Premium Taxes (To Nearest Dollar)				
LINE NO	DESCRIPTION OF NET PREMIUMS WRITTEN IN SOUTH CAROLINA	DIRECT NET PREMIUMS WRITTEN (A)	TAX RATE (B)	PREMIUM TAXES DUE A x B = C (C)
0501	Life (Schedule 04, Ln 01.01, Col. C) (Enter Tax on Schedule 01, Ln 0103)	.00	0.0075	.00
0503	Accident & Health (Schedule 04, Line 13.00, Col. C) (Enter Tax on Schedule 01, Ln 0105)	.00	0.0125	.00
0599	Total			.00

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Schedule 06 - Insurance Premium Tax Credits Allowable (Attach description of computations)				
LINE NO	DESCRIPTION OF PREMIUM TAX CREDITS ALLOWABLE IN SOUTH CAROLINA	ASSESSMENT DATE	TOTAL ASSESSMENT AMOUNT	TAX CREDIT APPLIED
0601	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0602	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0603	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0604	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0605	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0606	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0607	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0608	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0609	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0610	S.C. Life & Health Guaranty Association Tax Credit		.00	.00
0611	S.C. Health Insurance Pool Tax Credit		.00	.00
0612	S.C. Health Insurance Pool Tax Credit		.00	.00
0613	S.C. Health Insurance Pool Tax Credit		.00	.00
0614	S.C. Health Insurance Pool Tax Credit		.00	.00
0615	S.C. Health Insurance Pool Tax Credit		.00	.00
0621	S.C. Jobs Tax Credit (Credit not to exceed 50% of Schedule 05, Ln 0599)			.00
0631	S.C. Initiative for Child Care Tax Credit (Credit not to exceed 50% of Schedule 05, Ln 0599)			.00
0641	S.C. Palmetto Seed Capital Fund Limited Partnership			.00
0681	S.C. Drip/Trickle Irrigation Systems Credit			.00
0682	S.C. Minority Business Credit			.00
0683	S.C. Water Resources Credit			.00
0684	S.C. Corporate Headquarters Credit			.00
0685	S.C. Infrastructure Construction or Improvement Credit			.00
0686	S.C. Credit for Wages Paid to Employee Terminated Due to Base Closure			.00
0687	S.C. Credit for Hiring AFDC Recipients			.00
0688	S.C. Economic Impact Zone Property Investment Credit			.00
0689	S.C. Scenic Rivers Credit			.00
0698	All Other S.C. Tax Credits			.00
0699	Total of all Allowable Tax Credits for Year-ending December 31. (Enter credit on Schedule 01, Ln 0150)			.00